

Utah Government Record Request Form

To _____

(The response to a request may be delayed if it is not directed properly. To find out where to direct a request, consult the agency's rules or phone the agency or the State Archives. Sandy City Recorder - 801-568-7135 Fax: 801-568-7137; State Archives - 801-531-3848.)

Description of record sought (record must be described with reasonable specificity):

☐ I would like to inspect (view) the records.

☐ I would like to receive a copy of the records. I understand I may be responsible for fees associated with copying charges or research charges as permitted by **UCA 63G-2-203**.

I authorize costs up to \$ _____.

☐ **UCA 63G-2-203 (4)** encourages agencies to fulfill a record request without charge. Based on **UCA 63G-2-203(4)**, I am requesting a waiver of copy costs because:

☐ releasing the record primarily benefits the public rather than a person
(please explain) _____

☐ I am the subject of the record

☐ My legal rights are directly affected by the record and I am impoverished.

(PLEASE ATTACH INFORMATION SUPPORTING YOUR REQUEST FOR WAIVER)

If the requested record is not public, please explain why you believe you are entitled to access.

☐ I am the subject of the record.

☐ I am the person who provided the information.

☐ I am authorized to have access by the subject of the record or by the person who submitted the information. **Documentation required by UCA 63G-2-202 must be attached.**

☐ Other. Please explain: _____

☐ I am requesting an expedited response as permitted by **UCA 63G-2-204(3)(b)**. Please attach documentation that indicates your status as a member of the media with a statement that the records are required for a story for broadcast or publication; or other information that demonstrates you are entitled to an expedited response.

Requestor's Name: _____

Mailing Address: _____

Daytime Phone: _____

Signature: _____

Date: _____

Received by: _____

Date: _____